Patent and Trademark Office: U.S. Department of Commerce 10/95 pe a plus sign (+) inside this box [+] 09/857,682 U.S. Department of Commerce **Application Number** Rev. 10/95 Patent and Trademark Office Filing Date September 4, 2001 First Named Inventor Antti Särelä **Group Art Unit** 3731 TRANSMITTAL FORM (to be used for all correspondence after initial filing) **Examiner Name** Michael G. Mendoza 3003-00034 Total Number of pages in this Submission Attorney Docket Number

ENCLOSURES (check all that apply)							
☑ Fee Transmitta	nittal Form Fee Attached		Assignment Papers (for an Application)		After Allowance Communication To Group		
☑ Amendment/R □ After final □ Affidavits/D			Drawing(s) Licensing-related Papers		Appeal Communication to Board Of Appeals and Interferences		
☑ Extension of T ☐ Express Aband Request	·	0			Appeal Communication to Group ( Appeal Notice, Brief, Reply Brief)		
Statement/PTC  Certified Copy Document(s)  Response to M Incomplete	□ Information Disclosure Statement/PTO-1449 □ Certified Copy of Priority Document(s) □ Response to Missing Parts/		Power of Attorney, Revocation, Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CDs		Proprietary Information  Status Letter  Additional Enclosure(s) (Please identify below)  Return receipt postcard		
☐ Response to Missing Parts Under 37 1.52 or 1.53 ☐ Request to Rescind Previous Nonpublication Request		Ren	narks:				
		L					
Firm Or Individual Name Signature	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT  Peter T. Holsen (Reg. No. 54,180)  ANDRUS, SCEALES, STARKE & SAWALL, LLP  me 100 East Wisconsin Avenue, Suite 1100, Milwaukee, WI 53202						
Date May 22, 2006							
CERTIFICATE OF MAILING  I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 22nd day of May, 2006.							

Aleshia T. Prange

Moshia T. Prange

Date

May 22, 2006

Typed or printed name

Signature

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

approverk Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSWITAL FOR FY 2005    Applicant claims small entity status   See 37 CFR   1.27	Effective on 12/08/2004.				Complete if Known				
First Named Inventor Antiti Sarela et al  Examiner Name Michael G, Mendoza  Art Unit 3731  Attorney Docket No. 3003-00034  METHOD OF PAYMENT (check all that apply)    Check				1818).	Application Nun	nber	09/857,	682	
Examiner Name   Michael G. Mendoza   Art Unit   3731   Art Unit	FEE IK	AN5	MIIIA		Filing Date		Septem	ber 4, 2	2001
Applicant claims small entity status. See 37 CFR 1.27   Art Unit   3731	For	FY 20	005		First Named Inv	entor	Antti Sä	irelä et	al
METHOD OF PAYMENT (s) \$120.00    Attorney Docket No.   3003-00034	A a a li a a al a la ima a a a al		C 27 CED 4 27		Examiner Name	,	Michael	G. Mei	ndoza
METHOD OF PAYMENT (check all that apply)     Check	Applicant claims small	<del> </del>			Art Unit		3731		
Check	TOTAL AMOUNT OF PAYN	MENT (\$)	<b>\$120.00</b>		Attorney Docke	t No.	3003-00	0034	
Deposit Account   Deposit Account   Number   O1.2000   Deposit Account Name   Andrus, Sceales, Starke & Sawall, LLP	METHOD OF PAYMENT	(check all	that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below, except for the filling fee   Charge fae(s) indicated below. except for the filling fee   Charge fae(s) indicated below. except for the filling fee   Charge fae(s) indicated below. except for the filling fee   Charge fae(s) indicated below. except for the filling fee   Charge fae(s) indicated below. except for the filling fee   Charge fae(s) indicated below. except for the filling fee   Charge fae(s) indicated below. except fae(s)   Charge fae(s) indicated below. except fae(s)   Fee(s)   Fe			•						
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  WARNINS: Information on this form was become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES SEARCH FEES SEARCH FEES SEARCH FEES SEARCH FEES SMall Entity Fee (\$) Fee	Deposit Account De	eposit Account	Number: 01.2000	)	Deposit Ad	count Na	<sub>ime:</sub> Andrus,	Sceales,	Starke & Sawall, LLP
Charge any additional fee(s) or underpayments of fee(s)   Credit any overpayments	For the above-identif	ied deposit a	ccount, the Director	r is here	by authorized to	: (check	all that apply	<b>'</b> )	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.    FEE CALGULATION	Charge fee(s)	indicated be	low		Charg	e fee(s)	indicated be	low, excep	t for the filing fee
MARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.    FEE CALCULATION	Charge any ac	dditional fee(	s) or underpayment	s of fee	(s) 🕢 Credit	any ove	erpayments		
The content of the	WARNING: Information on this	form may be	come public. Credit c	ard info	rmation should n	ot be inc	luded on this	form. Provid	de credit card
Paper									. , <del></del>
Application Type	1. BASIC FILING, SEAR	CH, AND E	XAMINATION FI	EES					
Application Type				SEARC		EXAN			
Utility   300   150   500   250   200   100	Application Type			Fee_(\$)		Fee			Fees Paid (\$)
Plant	Utility	300		500		200		_	
Reissue 300 150 500 250 600 300  Provisional 200 100 0 0 0 0 0  2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25  Each independent claims	Design	200	100	100	50	130	65		
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 2. EXCESS CLAIM FEES  Fee Description Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee Pai	Plant	200	100	300	150	160	80		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Each independent claims  Multiple dependent claims  Extra Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims  Fee (\$) Fee Paid (\$) F	Reissue	300	150	500	250	600	300		·
Fee Description  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each claim over 3 or, for Reissues, each independent claim more than in the original patent  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 2  10	Provisional	200	100	0	0	C	0		
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$) Fee Paid (\$) Multiple Dependent Claims  Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 = /50 = (round up to a whole number) x = \$0.00  Fees Paid (\$)		S							
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180  Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims  23 - 23 = 0 x \$0.00 = \$0.00 Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  3 - 3 = 0 x \$0.00 = \$0.00  HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x = \$0.00  4. OTHER FEE(\$)  Non-English Specification, \$130 fee (no small entity discount)		. Daiasuas	anah alaim ayar 3	M and	mana than in tl		mal matant		
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  APP = highest number of independent claims paid for, if greater than 3  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Cound up to a whole number)  Fee (\$)  Fee Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)								inal naten	
Total Claims   Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims    23 - 23 = 0   x   \$0.00   = \$0.00   Fee (\$)    HP = highest number of total claims paid for, if greater than 20    Indep. Claims   Extra Claims   Fee (\$)   Fee Paid (\$)    3 - 3 = 0   x   \$0.00   = \$0.00    HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)    for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)    - 100 =   /50 =   (round up to a whole number)   x   = \$0.00    4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)			r reassues, each	macpei	nacin Ciaim inc	ore than	i iii tiic oi ig	mai paten	
HP = highest number of total claims paid for, if greater than 20  Indep. Claims  3 - 3 = 0 x \$0.00 = \$0.00  HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Cround up to a whole number) x = \$0.00  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)			Fee (\$)	Fee P	aid (\$)	Multip	le Depende	nt Claims	
Indep. Claims  3 - 3 = 0 x \$0.00 = \$0.00  HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 = /50 = (round up to a whole number) x = \$0.00  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)			· · · · · · · · · · · · · · · · · · ·		\$0.00	Fee	<u>⇒ (\$)</u>	Fee Paid	<u>(\$)</u>
3 = 0 x \$0.00 = \$0.00  HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	_		_	Fee Pa	aid (\$)				
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	3 - 3 =	0	x \$0.00 =						
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	· ·	·	paid for, if greater than	3					
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 =									
Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)									
- 100 = / 50 = (round up to a whole number) x = \$0.00  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)	100 = / 50 = (round <b>up</b> to a whole number) x =\$0.00								
Other: Petition for Extension of Time (one-month) \$120.00	•		•	•	•				
	Other: Petition for								

SUBMITTED BY				
Signature	Petu //	tal	Registration No. (Attorney/Agent) 54,180	Telephone 414-271-7590
Name (Print/Type)	Peter T. Holsen			Date May 22, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.